

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No. 16-RC-214839 Date Filed 2/14/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer STP Nuclear Operating Company		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) PO Box 289 Wadsworth, Tx 77483	
3a. Employer Representative - Name and Title Tim Powell CNO		3b. Address (If same as 2b - state same) same	
3c. Tel. No. 316-972-8919	3d. Cell No. 713-459-1045	3e. Fax No.	3f. E-Mail Address egriesel@stpegs.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Generation		4b. Principal product or service Electricity	
5b. Description of Unit Involved Included: See Attachment  Excluded: See Attachment		5a. City and State where unit is located: Wadsworth, Tx  6a. No. of Employees in Unit: 34  6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 2/13/2018 and Employer declined recognition on or about (Date) (If no reply received, so state). no reply at this time  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

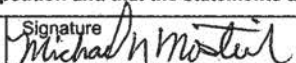
8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? no If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name na		10b. Address		10c. Tel. No.		10d. Cell No.	
				10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.				11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): 3/6/2018		11c. Election Time(s): 5am-9am and 5pm-7pm		11d. Election Location(s): STP-NOC Training Facility			
12a. Full Name of Petitioner (including local name and number) International Brotherhood of Electrical Workers Local Union 66				12b. Address (street and number, city, state, and ZIP code) 4345 Allen Genoa Pasadena, Tx 77504			
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers AFL-CIO							
12d. Tel No. 713-943-0716		12e. Cell No. 281-794-2663		12f. Fax No. 713-943-0162		12g. E-Mail Address mosteit66@aol.com	
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.							
13a. Name and Title Michael N Mosteit Assistant Business Manager/Organizer				13b. Address (street and number, city, state, and ZIP code) 4345 Allen Genoa Pasadena, Tx 77504			
13c. Tel No. 713-943-0716		13d. Cell No. 281-794-2663		13e. Fax No. 713-943-0162		13f. E-Mail Address mosteit66@aol.com	

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Michael N Mosteit	Signature 	Title Assistant Business Manager/Organizer	Date 2/14/2018
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

## **ATTACHMENT "A"**

The Petitioner seeks a self-determination election in the voting group of employees listed below. The petitioner presently represents approximately four hundred and seventy five (475) employees of the Employer.

The Election would determine whether the Petitioned-for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be included in the existing collective bargaining unit, pursuant to the Board's decision in *Armour & Co.*, 40 NLRB 1333 (1942) and the *Globe Machine & Stamping Co.*, 3 NLRB 294 (1937). If a majority of the employees in the voting group vote against representation, they will be taken to have indicated the desire to remain unrepresented.

**Included:** All full time Senior Reactor Operators at STPNOC (South Texas Project Nuclear Operating Company)

**Excluded:** All other employees, supervisors and guards as defined in the National Labor Relations Act as amended



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-214841

Date Filed  
2/14/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer</b> STP Nuclear Operating Company		<b>2b. Address(es) of Establishment(s) involved</b> (Street and number, city, State, ZIP code) PO Box 289 Wadsworth, Tx 77483	
<b>3a. Employer Representative - Name and Title</b> Tim Powell CNO		<b>3b. Address</b> (If same as 2b - state same) same	
<b>3c. Tel. No.</b> 316-972-8919	<b>3d. Cell No.</b> 713-459-1045	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> egriesel@stpegs
<b>4a. Type of Establishment</b> (Factory, mine, wholesaler, etc.) Electrical Generation		<b>4b. Principal product or service</b> Electricity	
<b>5b. Description of Unit Involved</b> Included: see attachment  Excluded: see attachment		<b>5a. City and State where unit is located:</b> Wadsworth, Tx	
		<b>6a. No. of Employees in Unit:</b> 5	
		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

**Check One:** ☒ **7a.** Request for recognition as Bargaining Representative was made on (Date) 2/13/2018 and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state). **no reply at this time**  
☐ **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent</b> (If none, so state).		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	
		<b>8i. Expiration Date of Current or Most Recent Contract, if any</b> (Month, Day, Year)	

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** no If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above.** (If none, so state)

<b>10a. Name</b> na	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> 3/6/2018	<b>11c. Election Time(s):</b> 9am-11am	<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
<b>12a. Full Name of Petitioner (including local name and number)</b> International Brotherhood of Electrical Workers Local Union 66		<b>11d. Election Location(s):</b> STP-NOC Training Facility
<b>12b. Address (street and number, city, state, and ZIP code)</b> 4345 Allen Genoa Pasadena, Tx 77504		

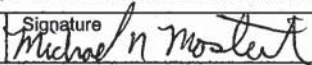
**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
International Brotherhood of Electrical Workers AFL-CIO

<b>12d. Tel No.</b> 713-943-0716	<b>12e. Cell No.</b> 281-794-2663	<b>12f. Fax No.</b> 713-943-0162	<b>12g. E-Mail Address</b> mosteit66@aol.com
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Michael N Mosteit Assistant Business Manager/Organizer		<b>13b. Address (street and number, city, state, and ZIP code)</b> 4345 Allen Genoa Pasadena, Tx 77504	
<b>13c. Tel No.</b> 713-943-0716	<b>13d. Cell No.</b> 281-794-2663	<b>13e. Fax No.</b> 713-943-0162	<b>13f. E-Mail Address</b> mosteit66@aol.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

<b>Name (Print)</b> Michael N Mosteit	<b>Signature</b> 	<b>Title</b> Assistant Business Manager/Organizer	<b>Date</b> 2/14/2018
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

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## **ATTACHMENT "A"**

The Petitioner seeks a self-determination election in the voting group of employees listed below. The petitioner presently represents approximately four hundred and seventy five (475) employees of the Employer.

The Election would determine whether the Petitioned-for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be included in the existing collective bargaining unit, pursuant to the Board's decision in Armour & Co., 40 NLRB 1333 (1942) and the Globe Machine & Stamping Co., 3 NLRB 294(1937). If a majority of the employees in the voting group vote against representation, they will be taken to have indicated the desire to remain unrepresented.

**Included:** All full time Access Coordinators at STPNOC (South Texas Project Nuclear Operating Company)

**Excluded:** All other employees, supervisors and guards as defined in the National Labor Relations Act as amended



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. <b>16-RC-215256</b>	Date Filed <b>2/22/2018</b>

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer</b> Kalman & Co., Inc/Gryphon Technologies		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 501 W. Felix St, Fort Worth TX 76115	
<b>3a. Employer Representative - Name and Title</b> Barbara Kalman Co-founder; Pamela Braden Co-founder		<b>3b. Address (If same as 2b - state same)</b> 5366 Virginia Beach Blvd, Ste 303, Virginia Beach, VA 23462; 80 M St, SE, Ste 600, Washington, D.C. 20003	
<b>3c. Tel. No.</b> 757-461-4292; 202-621-1100	<b>3d. Cell No.</b>	<b>3e. Fax No.</b> 757-461-3832; 202-621-1135	<b>3f. E-Mail Address</b> barbara.kalman@kalmancoinc.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Warehouse		<b>4b. Principal product or service</b> Logistics	
<b>5a. City and State where unit is located:</b> Ft. Worth			<b>6a. No. of Employees in Unit:</b> 98
<b>5b. Description of Unit Involved</b> <b>Included:</b> All material handlers/laborers, material coordinators, warehouse specialists, quality assurance. <b>Excluded:</b> All other employees including clerical, management, and guards as defined by the act.			<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

**Check One:** ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state).</b>		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** \_\_\_\_\_ If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_ has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

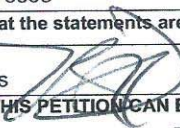
**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

<b>11. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election.		<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
<b>11b. Election Date(s):</b> 3/13/2018 or 3/16/2018	<b>11c. Election Time(s):</b> 11am-2pm	<b>11d. Election Location(s):</b> Warehouse breakroom	
<b>12a. Full Name of Petitioner (including local name and number)</b> Bridget Davis, International Union of Operating Engineers, Local 351		<b>12b. Address (street and number, city, state, and ZIP code)</b> 111 E. Coolidge St, Borger, TX 79007	
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)</b> The American Federation of Labor and Congress of Industrial Organization			
<b>12d. Tel No.</b>	<b>12e. Cell No.</b>	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b>

<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title</b> Bridget Davis		<b>13b. Address (street and number, city, state, and ZIP code)</b> 111 E. Coolidge St, Borger, TX 79007	
<b>13c. Tel No.</b> 214-732-8598	<b>13d. Cell No.</b> 214-732-8598	<b>13e. Fax No.</b> 806-274-7306	<b>13f. E-Mail Address</b> brdavis7@gmail.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Bridget Davis	Signature 	Title Union Organizer	Date 2/21/2018
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

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UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-215876

Date Filed  
3/5/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer**  
Calumet specialty Products Partners, L.P.

**2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)**  
7811 South Presa Street San Antonio, TX 78223

**3a. Employer Representative - Name and Title**  
James Kelly, VP Operations Plant Manager

**3b. Address (If same as 2b - state same)**  
same

**3c. Tel. No.**  
210-918-7458

**3d. Cell No.**  
(318)2103922

**3e. Fax No.**

**3f. E-Mail Address**  
James.Kelly@calumetspecialty.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Refinery

**4b. Principal product or service**  
oil

**5a. City and State where unit is located:**  
San Antonio, TX

**5b. Description of Unit Involved**

**Included:** All full-time and Part-time operators and maintenance employees, including terminal operators, Lab Tech and Electricians employed by Calumet Specialty L.P. at its 7811 S. Presa St. San Antonio, TX 78223 and 20830 Lamn Rd Elmenfort, TX 78112

**Excluded:** Office clericals and professional employees, Supervisors, Guards and all other employees as defined by the Act.

**6a. No. of Employees in Unit:**  
47

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** Yes ☒ No ☐

**Check One:** ☒ **7a. Request for recognition as Bargaining Representative was made on (Date) by petition** and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).

☐ **7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.**

**8a. Name of Recognized or Certified Bargaining Agent (if none, so state).**

**8b. Address**

**8c. Tel. No.**

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any**  
none

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** no If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

**10a. Name**

**10b. Address**

**10c. Tel. No.**

**10d. Cell No.**

**10e. Fax No.**

**10f. E-Mail Address**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

**11a. Election Type:** ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**  
March 22, & 23, 2018

**11c. Election Time(s):**  
March 22, 3:00 to 7:00 P.M. March 23, 5:00 to 7:00 P.M.

**11d. Election Location(s):**  
Employees Break Room

**12a. Full Name of Petitioner (Including local name and number)**

United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry and Service Workers International Union AFL-CIO

**12b. Address (street and number, city, state, and ZIP code)**  
60 Boulevard of the Allies, Pittsburgh, PA 15222

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**

United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry and Service Workers International Union AFL-CIO.

**12d. Tel. No.**

**12e. Cell No.**

**12f. Fax No.**

**12g. E-Mail Address**

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title** Dionisio Gonzalez USW Rep.

**13b. Address (street and number, city, state, and ZIP code)**

**13c. Tel. No.**

**13d. Cell No.**  
(323) 253-1812

**13e. Fax No.**

**13f. E-Mail Address**  
dgonzalez@usw.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

**Name (Print)**  
Dionisio Gonzalez

**Signature**

*Dionisio Gonzalez*

**Title**

USW Rep.

**Date**

March 5, 2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

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UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-217658	Date Filed 4/3/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Ash Grove Cement Company		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 900 Gifco Road, Midlothian, TX 76065	
3a. Employer Representative - Name and Title Kim White, Human Resources Manager		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. (972) 723-7202	3d. Cell No. (662) 978-2836	3e. Fax No. (972) 723-7209	3f. E-Mail Address kim.white@ashgrove.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Manufacturer		4b. Principal product or service Cement	5a. City and State where unit is located: Midlothian, TX

5b. Description of Unit Involved  
**Included:** All full-time and regular part-time employees at the employer's facility located at 900 Gifco Rd. in Midlothian, TX  
**Excluded:** All other employees, departments, office, clerical, guards, managerial and supervisory employees as defined by the Act.

6a. No. of Employees in Unit:  
~80  
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address -	
8c. Tel. No. -	8d. Cell No. -	8e. Fax No. -	8f. E-Mail Address -
8g. Affiliation, if any -		8h. Date of Recognition or Certification -	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) -

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)  
None

10a. Name -	10b. Address -	10c. Tel. No. -	10d. Cell No. -
		10e. Fax No. -	10f. E-Mail Address -

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): 04/26/2018 & 04/27/2018	11c. Election Time(s): Thursday 8:00a-10:00a & 5:00p-7:00p Friday 9:00a-11:00a	11d. Election Location(s): Main Breakroom
12a. Full Name of Petitioner (including local name and number) International Brotherhood of Boilermakers		12b. Address (street and number, city, state, and ZIP code) 753 State Ave, Suite 570 Kansas City, KS, 66101

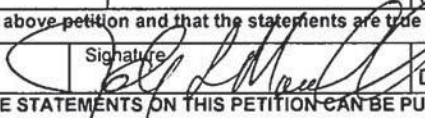
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)  
International Brotherhood of Boilermakers, Iron Ship Builders, Blacksmiths, Forgers and Helpers

12d. Tel. No. (913) 371-2640	12e. Cell No.	12f. Fax No. (913) 281-8101	12g. E-Mail Address
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Jody L Mauller, Director of Organizing		13b. Address (street and number, city, state, and ZIP code) 753 State Ave, Suite 570 Kansas City, KS, 66101	
13c. Tel. No. (765) 243-1963	13d. Cell No.	13e. Fax No. (888) 721-4047	13f. E-Mail Address jmauller@boilermakers.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Jody L Mauller	Signature 	Title Director of Organizing	Date 04/02/2018
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD

**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-218809

Date Filed  
4/20/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer</b> ELECTRONIC SYSTEM SERVICES, INC.		<b>2b. Address(es) of Establishment(s) involved</b> (Street and number, city, State, ZIP code) 9000 BLUE MOUND ROAD, FORT WORTH, TX 76131	
<b>3a. Employer Representative - Name and Title</b> DAVE MURRAY, OWNER		<b>3b. Address</b> (If same as 2b - state same) 9000 BLUE MOUND ROAD, FORT WORTH, TX 76131	
<b>3c. Tel. No.</b> 817-232-5268	<b>3d. Cell No.</b> 817-274-4724	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> MURRAY_RDAVE@MSN.COM
<b>4a. Type of Establishment</b> (Factory, mine, wholesaler, etc.) GOVERNMENT CONTRACTOR		<b>4b. Principal product or service</b> ELECTRONIC TECHNICIANS	<b>5a. City and State where unit is located:</b> FORT WORTH, TEXAS

**5b. Description of Unit Involved**  
**Included:** ALL ELECTRONIC TECHNICIANS III

**6a. No. of Employees in Unit:**  
5  
**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** Yes ☒ No ☐

**Excluded:** All other employees including clerical, management, and guards as defined by the act.

**Check One:** ☐ **7a.** Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
☐ **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent</b> (If none, so state).		<b>8b. Address</b>	
<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any</b> (Month, Day, Year)

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** \_\_\_\_\_ If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> May 11, 2018	<b>11c. Election Time(s):</b> 11:30a - 12:30p	<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
<b>12a. Full Name of Petitioner</b> (including local name and number) Bridget Davis, IUOE, Local 351		<b>11d. Election Location(s):</b> Conference room
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent</b> (if none, so state) The American Federation of Labor and Congress of Industrial Organization		<b>12b. Address</b> (street and number, city, state, and ZIP code) 111 E. Coolidge St, Borger, TX 79007

<b>12d. Tel. No.</b>	<b>12e. Cell No.</b>	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b>
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Bridget Davis		<b>13b. Address</b> (street and number, city, state, and ZIP code) 111 E. Coolidge St, Borger, TX 79007	
<b>13c. Tel. No.</b> 214-732-8598	<b>13d. Cell No.</b> 214-732-8598	<b>13e. Fax No.</b> 806-274-7305	<b>13f. E-Mail Address</b> brdavis7@gmail.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

<b>Name</b> (Print) Bridget Davis	<b>Signature</b> 	<b>Title</b> Union Organizer	<b>Date</b> 4/20/2018
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



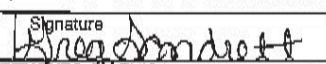
FORM NLRB-602 (RC)  
(4-15)UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-218984Date Filed  
4/24/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov](http://www.nlrb.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Aluma Systems		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 14942 Talcott Street, Houston, TX 77015	
3a. Employer Representative - Name and Title Steve Krause - General Manager		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. 281-860-1900	3d. Cell No.	3e. Fax No. 281-860-1953	3f. E-Mail Address stkrause@aluma.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Warehouse		4b. Principal product or service Concrete construction	
5a. City and State where unit is located: Houston, TX		5b. No. of Employees in Unit: 25	
5c. Description of Unit Involved Included: All full-time, regular part-time warehouse, yard, truck driving employees & working foreman Excluded: Sales employees, Office clerical employees, Professional employees, guards, & supervisors		5d. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 4/23/2018 and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): May 9, 2018	11c. Election Time(s): 8 am to 4 pm	11d. Election Location(s):	
12a. Full Name of Petitioner (including local name and number) Retail, Wholesale & Department Store Union - Southeast Council		12b. Address (street and number, city, state, and ZIP code) 1838 Metropolitan Pkwy, SW, Suite 204, Atlanta, GA 30315	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (If none, so state) Retail, Wholesale & Department Store Union/UFCW			
12d. Tel. No. 404-758-0865	12e. Cell No. 678-507-6636	12f. Fax No. 404-758-5628	12g. E-Mail Address rwdseuc@aol.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Greg Scandrett, Union Representative		13b. Address (street and number, city, state, and ZIP code) 1838 Metropolitan Pkwy, SW, Suite 204, Atlanta, GA 30315	
13c. Tel. No. 404-758-0865	13d. Cell No. 678-507-6636	13e. Fax No. 404-758-5628	13f. E-Mail Address rwdseuc@aol.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Greg Scandrett	Signature 	Title Union Representative	Date 4/23/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

## PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No  
**16-RC-219100**

Date Filed  
**4/25/2018**

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov](http://www.nlrb.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION:** RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer**  
**CTI COMPOSITE TECHNOLOGY, INC.**

**2b. Address(es) of Establishment(s) Involved (street and number, city, state, zip code)**  
**1727 S. MAIN ST., DFW AIRPORT, TX 75261**

**3a. Employer Representative - Name and Title**  
**ERIC GRISWOLD - GENERAL MANAGER**

**3b. Address (if same as 2b - state same)**  
**(SAME AS ABOVE)**

**3c. Tel. No.**  
**972-456-6900**

**3d. Cell No.**

**3e. Fax No.**  
**972-456-0162**

**3d. E-Mail Address**  
**ERIC.D.GRISWOLD@LMCO.COM**

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
**FACTORY**

**4b. Principal product or service**  
**ROTOR BLADE REPAIR**

**5a. City and State where unit is located:**  
**DFW AIRPORT - DALLAS, TX**

**5b. Description of Unit Involved**  
Included:  
**PLEASE SEE ATTACHMENT.**

**6a. No. of Employees in Unit:**  
**190**

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐**

Excluded:  
**OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.**

Check One:  
☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about \_\_\_\_\_ (date) (if no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent (if none, so state).**  
**NONE**

**8b. Address**  
**N/A**

**8c. Tel. No.**  
**N/A**

**8d. Cell No.**  
**N/A**

**8e. Fax No.**  
**N/A**

**8f. E-Mail Address**  
**N/A**

**8g. Affiliation, if any**  
**N/A**

**8h. Date of Recognition or Certification**  
**N/A**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**  
**N/A**

**9. Is there now a strike or picketing at the Employer's establishment(s) involved? N/A If so, approximately how many employees are participating? \_\_\_\_\_**  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)** **NONE**

**10a. Name**  
**N/A**

**10b. Address**  
**N/A**

**10c. Tel. No.**  
**N/A**

**10d. Cell No.**  
**N/A**

**10e. Fax No.**  
**N/A**

**10f. E-Mail Address**  
**N/A**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

**11a. Election Type:**  
☒ Manual ☐ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**  
**MAY 16, 2018**

**11c. Election Time(s):**  
**6:00 AM - 8:00 AM & 3:00 PM - 4:30 PM**

**11d. Election Location(s):**  
**BREAK ROOM - 1<sup>st</sup> FLOOR, 1727 S. MAIN ST. DFW AIRPORT, TX 75261**

**12a. Full Name of Petitioner (including local name and number)**  
**IAMAW, AFL-CIO**

**12b. Address (street and number, city, state, and ZIP code)**  
**690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011**

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
**INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO**

**12d. Tel. No.**  
**817-505-0100**

**12e. Cell No.**

**12f. Fax No.**  
**817-459-0107**

**12g. E-Mail Address**

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title**

**13b. Address (street and number, city, state, and ZIP code)**

**RAMON A. GARCIA, GRAND LODGE REPRESENTATIVE** **690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011**

**13c. Tel. No.**  
**817-505-0100**

**13d. Cell No.**  
**904-803-9996**

**13e. Fax No.**  
**817-459-0107**

**13f. E-Mail Address**  
**RGARCIA@IAMAW.ORG**

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

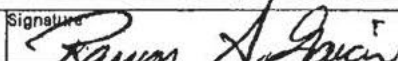
Name (Print)

Signature

Title

DATE

**RAMON A. GARCIA**



**GRAND LODGE REPRESENTATIVE**

**4/25/2018**

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

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ATTACHMENT:

ALL FULL AND REGULAR PART TIME INSPECTORS (QAR) SHIPPING & RECEIVING,  
STENCIL (MAINTENANCE BUILDING WORKERS) PAINTERS A/B (PREPARATION CORS)  
TOOLING MACHINISTS, WELDING, NDI, BALANCE & WHIRL TOWER, MATERIAL BONDER  
A/B/C (EVALUATION CORS) PC CLERK A/B, MATERIAL HANDLERS, WORK LEADS,  
CONTRACTORS, AND JANITORS WORKING FOR CTI COMPOSITE TECHNOLOGY, INC.  
AT DFW AIRPORT.

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
**16-RC-219600**

Date Filed  
**5/4/2018**

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer**  
CoreCivic

**2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)**  
Webb County Detention Center - 9998 S. Highway 83, Laredo, TX 78046

**3a. Employer Representative - Name and Title**  
Arnoldo Zepeda, Chief of Security

**3b. Address (If same as 2b - state same)**  
10 Burton Hills Blvd, Nashville, TN 37215

**3c. Tel. No.**  
956-236-9394

**3d. Cell No.**

**3e. Fax No.**

**3f. E-Mail Address**  
arnoldo.zepeda@cca.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Detention Center

**4b. Principal product or service**  
Security and Transportation

**5a. City and State where unit is located:**  
Laredo, TX

**5b. Description of Unit Involved**  
**Included:** All full-time and regular part-time detention and transportation officers, both armed and unarmed, performing guard duties as defined by Section 9(b)(3) of the National Labor Relations Act, as amended.  
**Excluded:** All other employees, including administrative, clerical, supervisors, and non-guards, as defined

**6a. No. of Employees in Unit:**  
70

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** Yes ☒ No ☐

**Check One:** ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent (If none, so state).**  
NONE

**8b. Address**

**8c. Tel No.**

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any**

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** \_\_\_\_\_ If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**  
NONE

**10a. Name**

**10b. Address**

**10c. Tel. No.**

**10d. Cell No.**

**10e. Fax No.**

**10f. E-Mail Address**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

**11a. Election Type:** ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**  
TBD

**11c. Election Time(s):**  
TBD

**11d. Election Location(s):**  
Via Mail

**12a. Full Name of Petitioner (including local name and number)**  
Federal Contract Guards of America (FCGOA)

**12b. Address (street and number, city, state, and ZIP code)**  
445 Park Ave, New York, NY 10022

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**

**12d. Tel No.**  
212-541-3753

**12e. Cell No.**

**12f. Fax No.**  
917-322-2105

**12g. E-Mail Address**  
gfjames@fcgoa.com

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title** Guy F. James, President

**13b. Address (street and number, city, state, and ZIP code)**  
445 Park Ave, New York, NY 10022

**13c. Tel No.**  
212-541-3753


**13d. Cell No.**  
631-983-7972

**13e. Fax No.**  
917-322-2105

**13f. E-Mail Address**  
gfjames@fcgoa.com

**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

**Name (Print)**  
Guy James

**Signature** 

**Title**  
President

**Date**  
May 4, 2018

**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-220802

Date Filed  
5/24/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer  
STP Nuclear Operating Company

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)  
PO Box 289 Wadsworth, Tx 77483

3a. Employer Representative - Name and Title  
Tim Powell CNO

3b. Address (if same as 2b - state same)  
same

3c. Tel. No.  
316-972-8919

3d. Cell No.  
713-459-1045

3e. Fax No.

3f. E-Mail Address  
egriesel@stpegs

4a. Type of Establishment (Factory, mine, wholesaler, etc.)  
Electrical Generation

4b. Principal product or service  
Electricity

5e. City and State where unit is located:  
Wadsworth, Tx

6b. Description of Unit Involved  
Included: See Attachment

Excluded:  
See Attachment

6a. No. of Employees in Unit:  
32

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) 5-23-18 and Employer declined recognition on or about (Date) (If no reply received, so state). **no reply at this time**

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? no If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):  
5-29-18

11c. Election Time(s):  
7am-10am

11d. Election Location(s):  
Employers Nuclear Training Center

12a. Full Name of Petitioner (including local name and number)  
International Brotherhood of Electrical Workers Local Union 66

12b. Address (street and number, city, state, and ZIP code)  
4345 Allen Genoa Pasadena, Tx 77504

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)  
International Brotherhood of Electrical Workers AFL-CIO

12d. Tel No.  
713-943-0716

12e. Cell No.  
281-798-1559

12f. Fax No.  
713-943-0162

12g. E-Mail Address  
Brucebet66@aol.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title  
Bruce Bettilyon Business Representative

13b. Address (street and number, city, state, and ZIP code)  
4345 Allen Genoa Pasadena, Tx 77504

13c. Tel No.  
713-943-0716

13d. Cell No.  
281-798-1559

13e. Fax No.  
713-943-0162

13f. E-Mail Address  
Brucebet66@aol.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)  
Bruce Bettilyon

Signature  
*Bruce Bettilyon*

Title  
Business Representative

Date  
5-23-18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



## **ATTACHMENT "A"**

The Petitioner seeks a self-determination election in the voting group of employees listed below. The petitioner presently represents approximately four hundred and seventy five (475) employees of the Employer.

The Election would determine whether the Petitioned-for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be included in the existing collective bargaining unit, pursuant to the Board's decision in *Armour & Co.*, 40 NLRB 1333 (1942) and the *Globe Machine & Stamping Co.*, 3 NLRB 294(1937). If a majority of the employees in the voting group vote against representation, they will be taken to have indicated the desire to remain unrepresented.

**Included:** All full time Maintenance Supervisors: Mechanical Supervisors, Electrical Supervisors, I&C Supervisors, Intergrated Maintenance Supervisors, Facilities Supervisors at STP NOC (South Texas Project Nuclear Operating Company)

**Excluded:** All other employees, supervisors and guards as defined in the National Labor Relations Act as amended

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-221123

Date Filed

5/30/18

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov](http://www.nlrb.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer**

Tigua Facility Services

**2b. Address(es) of Establishment(s) involved** (Street and number, city, State, ZIP code)

See Exhibit A

**3a. Employer Representative - Name and Title**

William D. Kilmer, General Manager

**3b. Address** (If same as 2b - state same)

9180 Socorro Rd, El Paso, TX 79907

**3c. Tel. No.**

915-298-0700

**3d. Cell No.**

915-726-3851

**3e. Fax No.**

915-242-0076

**3f. E-Mail Address**

wkilmer@tiguainc.org

**4a. Type of Establishment** (Factory, mine, wholesaler, etc.)

Government Facilities

**4b. Principal product or service**

Custodial and Maintenance Service

**5a. City and State where unit is located:**

Brownsville and Los Indios, TX

**5b. Description of Unit Involved**

**Included:** All full-time and regular part-time maintenance and custodial employees, working on the company's sites in South Texas.

**Excluded:** All office, clerical, guards, professional, confidential employees and supervisors, as defined in the National Labor Relations Act.

**6a. No. of Employees in Unit:**

26

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** Yes ☒ No ☐

**Check One:**

☐

7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).

☐

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent** (If none, so state).

International Union of Operating Engineers, Local 564 AFL-CIO

**8b. Address**

2120 North Brazosport Blvd, Richwood, TX 77531

**8c. Tel. No.**

979-480-0003

**8d. Cell No.**

**8e. Fax No.**

979-480-0509

**8f. E-Mail Address**

lewis@local564.com

**8g. Affiliation, if any**

AFL-CIO

**8h. Date of Recognition or Certification**

Unknown

**8i. Expiration Date of Current or Most Recent Contract, if any** (Month, Day, Year)

Unknown

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** No. If so, approximately how many employees are participating? \_\_\_\_\_

(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above.** (If none, so state)

**10a. Name**

**10b. Address**

**10c. Tel. No.**

**10d. Cell No.**

**10e. Fax No.**

**10f. E-Mail Address**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

**11a. Election Type:** ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**

To be determined

**11c. Election Time(s):**

Mail Ballot

**11d. Election Location(s):**

Mail Ballot

**12a. Full Name of Petitioner** (including local name and number)

Consolidated Commercial Workers of America, Local 528

**12b. Address** (street and number, city, state, and ZIP code)

148-06 Hillside Ave., Jamaica, NY 11435

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent** (if none, so state)

National Organization of Industrial Trade Unions (NOITU)-IUJAT

**12d. Tel. No.**

718-291-3434

**12e. Cell No.**

**12f. Fax No.**

718-526-2920

**12g. E-Mail Address**

ghustick@noitu.org

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title** Gerald Hustick, Representative

**13b. Address** (street and number, city, state, and ZIP code)

148-06 Hillside Ave., Jamaica, NY 11435

**13c. Tel. No.**

718-291-3434

**13d. Cell No.**

**13e. Fax No.**

718-526-2920

**13f. E-Mail Address**

ghustick@noitu.org

**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

**Name** (Print)

Gerald Hustick

**Signature**



**Title**

Representative

**Date**

5/30/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

**Exh. A**

2b. Addresses of Establishments:

Brownsville Federal Court House  
600 E. Harrison  
Brownsville, TX 78520

Veterans Bridge  
3300 S. Expressway 77/83  
Brownsville, TX 78521

Gateway Bridge  
1405 14<sup>th</sup> Street  
Brownsville, TX 78521

Brownsville / Matamoros International Bridge  
1300 Mexico Blvd  
Brownsville, TX 78520

Los Indios International Bridge  
100 Los Indios Blvd  
Los Indios, TX 78586



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No  
16-RC-222682

Date Filed  
6/25/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION-RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer <b>THE ROCKHILL GROUP (TRG)</b>		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) <b>541 1ST STREET, BLDG 308, LAUGHLIN AFB, TX 78843</b>	
3a. Employer Representative - Name and Title <b>CHRISTINA REEDER</b>		3b. Address (if same as 2b - state same) <b>1 ROCKHILL DR, MOLINA, FL 32577</b>	
3c. Tel. No. <b>850-754-0400</b>	3d. Cell No.	3e. Fax No. <b>850-754-0401</b>	3d. E-Mail Address <b>CHRISTINA.REEDER@THEROCKHILLGROUP.COM</b>
4a. Type of Establishment (Factory, mine, wholesaler, etc.) <b>BASE FACILITY MAINTENANCE</b>		4b. Principal product or service <b>SCA</b>	
		5a. City and State where unit is located: <b>LAUGHLIN AFB, TX</b>	

5b. Description of Unit Involved Included: <b>ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE ALL AIRFIELD OPERATIONS, ASSISTANT AIRFIELD MANAGEMENT, AIRFIELD MANAGEMENT AND OPERATIONS MANAGER.</b>		6a. No. of Employees in Unit: <b>2</b>
Excluded: <b>OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.</b>		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u>Petition will serve as request for recognition</u> and Employer declined recognition on or about _____ (date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). <b>NONE</b>		8b. Address <b>N/A</b>	
8c. Tel. No. <b>N/A</b>	8d. Cell No. <b>N/A</b>	8e. Fax No. <b>N/A</b>	8f. E-Mail Address <b>N/A</b>
8g. Affiliation, if any <b>N/A</b>		8h. Date of Recognition or Certification <b>N/A</b>	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) <b>N/A</b>

9. Is there now a strike or picketing at the Employers establishment(s) involved? N/A If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) **NONE**

10a. Name <b>N/A</b>	10b. Address <b>N/A</b>	10c. Tel. No. <b>N/A</b>	10d. Cell No. <b>N/A</b>
		10e. Fax No. <b>N/A</b>	10f. E-Mail Address <b>N/A</b>

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): <b>07/16/2018</b>	11c. Election Time(s): <b>8:00 AM - 8:30 AM</b>	11d. Election Location(s): <b>541 1ST STREET, BLDG. 308, LAUGHLIN AFB, TX 78443</b>

12a. Full Name of Petitioner (including local name and number) <b>IAMAW, AFL-CIO</b>	12b. Address (street and number, city, state, and ZIP code) <b>690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011</b>
---	--


12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)  
**INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO**

12d. Tel. No. <b>817-505-0100</b>	12e. Cell No.	12f. Fax No. <b>817-459-0107</b>	12g. E-Mail Address
--------------------------------------	---------------	-------------------------------------	---------------------

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title <b>JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE</b>		13b. Address (street and number, city, state, and ZIP code) <b>690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011</b>	
13c. Tel. No. <b>817-505-0100</b>	13d. Cell No. <b>682-401-7835</b>	13e. Fax No. <b>817-459-0107</b>	13d. E-Mail Address <b>JLITTLE@IAMAW.ORG</b>

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) <b>JAMES R. LITTLE</b>	Signature 	Title <b>GRAND LODGE REPRESENTATIVE</b>	DATE <b>06/25/2018</b>
--	--	--	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
16-RC-222838

Date Filed  
6/27/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer  
AKIMA GLOBAL SERVICES, LLC

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)  
Brownsville International Airport: 700 Amelia Earhart Dr., Brownsville, TX 78521

3a. Employer Representative - Name and Title  
Chris Hansen, Labor Relations

3b. Address (If same as 2b - state same)  
13873 Park Center Rd., Suite 300, N. Herndon, VA 20171

3c. Tel. No.  
571-353-7054

3d. Cell No.

3e. Fax No.

3f. E-Mail Address  
chris.hansen@akima.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)  
SECURITY

4b. Principal product or service  
TRANSPORTATION SECURITY

5a. City and State where unit is located:  
Brownsville, TX

**5b. Description of Unit Involved**

**Included:** ALL FULL-TIME AND PART-TIME ARMED AND UNARMED AIR SECURITY OFFICERS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY AKIMA GLOBAL SERVICES, LLC @ 700 AMELIA EARHART DR., BROWNSVILLE, TX 78521

**Excluded:** ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.

6a. No. of Employees in Unit:  
26

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state): **NONE**  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).  
NONE

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NO** If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)  
NONE

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):

11c. Election Time(s):  
Mail

11d. Election Location(s):  
Mail

**12a. Full Name of Petitioner (including local name and number)**

International Union, Security, Police and Fire Professionals of America (SPFPA)

12b. Address (street and number, city, state, and ZIP code)  
25510 Kelly Road, Roseville, MI 48066

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)  
International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No.

12e. Cell No.

12f. Fax No.

12g. E-Mail Address  
organize@spfpa.org

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

13a. Name and Title  
Gordon Gregory, General Counsel

13b. Address (street and number, city, state, and ZIP code)  
65 Cadillac Square, Suite 3727, Detroit, MI 48226

13c. Tel No.

13d. Cell No.

13e. Fax No.

13f. E-Mail Address  
Gordon@UnionLaw.net

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)  
David L. Hickey

Signature

Title  
International President

Date  
6/26/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

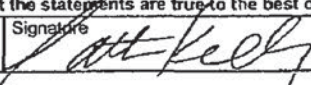
16-RC-223277

Date Filed

7/6/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://www.nlr.gov/), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Luminant		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 6322 FM 56, Glen Rose, TX 76043	
3a. Employer Representative - Name and Title: Stephanie Carroll, HR Manager		3b. Address (if same as 2b - state same): same	
3c. Tel. No. 254-897-8942	3d. Cell No. 903-391-0599	3e. Fax No. unknown	3f. E-Mail Address stephanie.carroll@luminant.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Nuclear Plant		4b. Principal Product or Service electricity production	5a. City and State where unit is located: Glen Rose, TX
5b. Description of Unit Involved: Included: Consulting Chemist Excluded: all other employees *armor-globe election to include position in existing unit		6a. Number of Employees in Unit: 1 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) about 5/1/2018 and Employer declined recognition on or about (Date) 5/1/2008 (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If so, approximately how many employees are participating? (Name of Labor Organization) has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) none			
10a. Name		10b. Address	10c. Tel. No.
			10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: in favor of			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): any Monday-Thursday		11c. Election Time(s): any 0600-1530	11d. Election Location(s): Comanche Peak nuclear plant
12a. Full Name of Petitioner (including local name and number): Catherine Anne Kelly IBEW Local 220		12b. Address (street and number, city, State and ZIP code): 2804 SE Loop 820, Fort Worth, TX 76104	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Brotherhood Of Electrical Workers			
12d. Tel. No. 202-833-7000	12e. Cell No. none	12f. Fax No. 202-728-7676	12g. E-Mail Address webmaster@ibew.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Catherine Kelly Assistant Business Manager		13b. Address (street and number, city, State and ZIP code): 2804 SE Loop 820, Fort Worth, TX 76140	
13c. Tel. No. 817-551-1885	13d. Cell No. 254-998-0147	13e. Fax No. 817-551-3736	13f. E-Mail Address ckelly@ibewlu220.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Catherine Kelly	Signature 	Title Assistant Business Manager	Date 7/6/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)  
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD

**RC PETITION**

**DO NOT WRITE IN THIS SPACE**

Case No. **16-RC-225522**

Date Filed **8/13/2018**

**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.**

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

<b>2a. Name of Employer</b> Edward Don		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 3501 Plano Pkwy TX The Colony 75056-5245	
<b>3a. Employer Representative - Name and Title</b> Jack Kimberlin		<b>3b. Address (If same as 2b - state same)</b> 3501 Plano Pkwy TX The Colony 75056-5245	
<b>3c. Tel. No.</b> (972) 624-7424	<b>3d. Cell No.</b> (972) 880-7811	<b>3e. Fax No.</b> (972) 624-7764	<b>3f. E-Mail Address</b> jackkimberlin@don.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Others		<b>4b. Principal product or service</b> Distributor of food service equipment and supplies	
		<b>5a. City and State where unit is located:</b> The Colony, TX	

<b>5b. Description of Unit Involved</b>		<b>6a. No. of Employees in Unit:</b> 7
<b>Included:</b> See Attached Page 2 for additional details		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></b>
<b>Excluded:</b> See Attached Page 2 for additional details		

**Check One:** ☒ **7a.** Request for recognition as Bargaining Representative was made on (Date) 08/10/2018 and Employer declined recognition on or about (Date) (If no reply received, so state). No reply received

☐ **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state).</b>		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** \_\_\_\_\_ If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> 08/30/2018	<b>11c. Election Time(s):</b> 1:00 p.m. to 5:00 p.m.	<b>11d. Election Location(s):</b> Break Room
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<b>12a. Full Name of Petitioner (including local name and number)</b> Carlos Mendez International Brotherhood of Teamsters Local 745	<b>12b. Address (street and number, city, state, and ZIP code)</b> 1007 Jonelle St TX Dallas 75217-5099
--	---

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
International Brotherhood of Teamsters

<b>12d. Tel No.</b> (214) 398-0661	<b>12e. Cell No.</b> (214) 675-4899	<b>12f. Fax No.</b> (214) 398-3216	<b>12g. E-Mail Address</b> camendez745@gmail.com
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> David Watsky Attorney Lyon, Gorsky & Gilbert, L.L.P.		<b>13b. Address (street and number, city, state, and ZIP code)</b> 12001 N Central Expy Ste 650 TX Dallas 75243-3781	
<b>13c. Tel No.</b> (214) 965-0090	<b>13d. Cell No.</b> (214) 415-7913	<b>13e. Fax No.</b> (214) 965-0097	<b>13f. E-Mail Address</b> dwatsky@lyongorsky.com

**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> David Watsky	<b>Signature</b> David K. Watsky	<b>Title</b> Attorney	<b>Date</b> 08/13/2018 15:37:36
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

Shipping Clerks, Receiving Clerks, Inventory Clerks, and Transportation Coordinator

Employees Excluded

Managers, Supervisors, Guards, and Human Resources

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD

**RC PETITION**

**DO NOT WRITE IN THIS SPACE**

Case No.  
16-RC-226860

Date Filed  
9/6/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov](http://www.nlrb.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer</b> Echo Transportation	<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 13350 T I Blvd TX Dallas 75243-1512
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<b>3a. Employer Representative - Name and Title</b> Marcells Nelson Jr.	<b>3b. Address (If same as 2b - state same)</b> 13350 T I Blvd TX Dallas 75243-1512
--	---

<b>3c. Tel. No.</b>	<b>3d. Cell No.</b> (214) 460-2273	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> mnelson@echo transportation.com
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Transportation	<b>4b. Principal product or service</b> Passenger Transportation	<b>5a. City and State where unit is located:</b> Dallas, TX
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<b>5b. Description of Unit Involved</b> <b>Included:</b> See Attached Page 2 for additional details <b>Excluded:</b> See Attached Page 2 for additional details	<b>6a. No. of Employees in Unit:</b> 18 <b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
---	---

**Check One:** ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state).</b>	<b>8b. Address</b>
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<b>8c. Tel No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
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<b>8g. Affiliation, if any</b>	<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>
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**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** \_\_\_\_\_ If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> September 21, 2018	<b>11c. Election Time(s):</b> N/A	<b>11d. Election Location(s):</b> N/A
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<b>12a. Full Name of Petitioner (including local name and number)</b> Kenneth Day Amalgamated Transit Union Local 1338	<b>12b. Address (street and number, city, state, and ZIP code)</b> 1111 Empire Central Pl TX Dallas 75247-4305
--	--

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
Amalgamated Transit Union

<b>12d. Tel No.</b> (214) 828-1641	<b>12e. Cell No.</b> (469) 855-0994	<b>12f. Fax No.</b> (214) 828-1809	<b>12g. E-Mail Address</b> kday1338@aol.com
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION	<b>13b. Address (street and number, city, state, and ZIP code)</b> 10000 New Hampshire Ave MD Silver Spring 20903-1790
--	--

<b>13c. Tel No.</b> (301) 431-7100	<b>13d. Cell No.</b> (202) 714-4219	<b>13e. Fax No.</b> (301) 431-7116	<b>13f. E-Mail Address</b> dsmith@atu.org
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**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> Daniel B. Smith	<b>Signature</b> Daniel B. Smith	<b>Title</b> Assistant General Counsel	<b>Date</b> 09/6/2018 11:37:55
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



Attachment

DO NOT WRITE IN THIS SPACE	
Case 16-RC-226860	Date Filed 9/6/2018

**Employees Included**

All full-time and regular part-time operators employed by the Employer in and out of its facility currently located at 13350 T I Blvd in Dallas, Texas.

**Employees Excluded**

All other employees, office clerical employees, guards, managers and supervisors defined by the Act.

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-229793

Date Filed

10/24/18

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://www.nlr.gov/), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer:**

BookPeople

**2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):**

603 N. Lamar Blvd. Austin, TX 78703

**3a. Employer Representative - Name and Title:**

Elizabeth Jordan, CEO

**3b. Address (if same as 2b - state same):**

Same

**3c. Tel. No.**

512-472-5050

**3d. Cell No.****3e. Fax No.****3f. E-Mail Address**

elizabeth@bookpeople.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**

Retail

**4b. Principal Product or Service**

Books

**5a. City and State where unit is located:**

Austin, TX

**5b. Description of Unit Involved:**

Included:

See Appendix A

Excluded:

**6a. Number of Employees in Unit:**

91

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** ☒ Yes ☐ No

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) N/A and Employer declined recognition on or about (Date) (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent (If none, so state)**

None

**8b. Address:****8c. Tel. No.****8d. Cell No.****8e. Fax No.****8f. E-Mail Address****8g. Affiliation, if any:****8h. Date of Recognition or Certification****8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** No ☒ If so, approximately how many employees are participating?

(Name of Labor Organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

None

**10a. Name****10b. Address****10c. Tel. No.****10d. Cell No.****10e. Fax No.****10f. E-Mail Address**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election:

**11a. Election Type:**☒ Manual ☐ Mail ☐ Mixed Manual/Mail**11b. Election Date(s):**

Thurs. Nov 8, 2018

**11c. Election Time(s):**

11:00am-1:00pm and 6:30pm-9:30pm

**11d. Election Location(s):**

BookPeople Third Floor Event Room

**12a. Full Name of Petitioner (including local name and number):**

Office &amp; Professional Employees Intl. Union Local 277

**12b. Address (street and number, city, State and ZIP code):**

641 N Cherry Lane, Forth Worth, TX 76108

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):**

Office and Professional Employees International Union, AFL-CIO

**12d. Tel. No.**

N/A

**12e. Cell No.**

206-954-0042

**12f. Fax No.**

N/A

**12g. E-Mail Address**

Jlevine@opeiu.org

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title:**

Jennifer Levine, Lead Organizer

**13b. Address (street and number, city, State and ZIP code):**

641 N Cherry Lane, Forth Worth, TX 76108

**13c. Tel. No.**

N/A

**13d. Cell No.**

206-954-0042

**13e. Fax No.**

N/A

**13f. E-Mail Address**

Jlevine@opeiu.org

**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

**Name (Print)**

Jennifer Levine

**Signature****Title**

Lead Organizer

**Date**

10/24/18

**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



**RC Petition – BookPeople**

Filed October 24, 2018

**Attachment A – Unit Description**

All full-time and regular part-time employees employed by the employer at its facility at 603 N. Lamar Blvd, Austin, TX 78703 in classifications set forth in Appendix A. Excluding managerial employees, temporary employees, confidential employees, guards and supervisors as defined in the Act.

**Appendix A**

Art Director  
Barista  
Bookkeeping Assistant  
Bookseller  
Bookseller/Master  
Business Accounts  
Buyer  
Buyer/Magazine  
Café Staff  
Events Coordinator  
Events Coordinator/Schools  
Events Host  
Events Host/Schools  
Events Staff  
Gifts Inventory Manager  
Gifts Receiving  
Gifts Staff  
Internet Orders  
Internet Orders/Coordinator  
Internet Orders/Mail  
Inventory Manager  
Inventory Manager/Kids  
Inventory Manager Assistant  
Inventory Manager Assistant/Kids  
IT Staff  
Marketing Staff  
Outreach Staff  
Receiver

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-231074

Date Filed

11/15/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://www.nlr.gov/), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

**2a. Name of Employer:**  
Wright Service Center LLC

**2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):**  
14140 Cypress N Houston  
Cypress, TX 77429

**3a. Employer Representative - Name and Title:**  
Alfred Donaldson - Supervisor

**3b. Address (if same as 2b - state same):**  
SAME

**3c. Tel. No.**  
281-477-6662

**3d. Cell No.**  
713-817-6902

**3e. Fax No.**  
281-477-6882

**3f. E-Mail Address**  
Adonaldson@mpnnextlevel.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Fleet Mechanic shop

**4b. Principal Product or Service**  
Vehicle and equipment repair

**5a. City and State where unit is located:**  
Cypress TX

**5b. Description of Unit Involved:**  
**Included:**  
See attachment "A"  
**Excluded:**  
See Attachment "A"

**6a. Number of Employees in Unit:**  
14

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** ☒ Yes ☐ No

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 11/15/2018 and Employer declined recognition on or about (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent (If none, so state)**

**8b. Address:**

**8c. Tel. No.**

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any:**

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** If so, approximately how many employees are participating? (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year)

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

**10a. Name**

**10b. Address**

**10c. Tel. No.**

**10d. Cell No.**

**10e. Fax No.**

**10f. E-Mail Address**

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election:

**11a. Election Type:**

☐ Manual ☐ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**  
12/10/2018

**11c. Election Time(s):**  
8:00 A.M. - 10:00 A.M.

**11d. Election Location(s):**  
14140 Cypress N. Houston Cypress, Tx 77429

**12a. Full Name of Petitioner (including local name and number):**

International Brotherhood Of Electrical Workers Local Union 66

**12b. Address (street and number, city, State and ZIP code):**

4345 Allen Genoa RD.  
Pasadena Tx 77504

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):**

International Brotherhood Of Electrical Workers AFL-CIO

**12d. Tel. No.**  
713-943-0716

**12e. Cell No.**  
346-269-3664

**12f. Fax No.**  
713-943-0162

**12g. E-Mail Address**  
Holmes66b@gmail.com

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title:**  
Benjamin Holmes - Organizer/Business Representative

**13b. Address (street and number, city, State and ZIP code):**  
4345 Allen Genoa Rd.  
Pasadena Tx 77504

**13c. Tel. No.**  
713-943-0716

**13d. Cell No.**  
346-269-3664

**13e. Fax No.**  
713-943-0162

**13f. E-Mail Address**  
Holmes66b@gmail.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

**Name (Print)**

Benjamin Holmes

**Signature**



**Title**

Organizer/Business Representative

**Date**

11/15/2018

**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**  
**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.



## ATTACHMENT "A"

The Petitioner seeks a self-determination election in the voting group of employees listed below. The election would determine whether the petitioned-for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be represented.

**Included:** All regular full time and part time employees outlined in job classifications and titles included in the fleet department in the southern division employed by Wright Service Center LLC located in Cypress, Texas.

**Excluded:** All other employees, including office, clerical employees, professional employees, guards and supervisors as defined by the Act.

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No  
**16-RC-231654**

Date Filed  
**11/27/2018**

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.			
2a. Name of Employer <b>RED RIVER SCIENCE &amp; TECHNOLOGY</b>		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) <b>2566 WILSON WAY BLDG. 4055, FORT SAM HOUSTON, SAN ANTONIO, TX 78234</b>	
3a. Employer Representative - Name and Title <b>RAUL BENAVIDES</b>		3b. Address (if same as 2b - state same) <b>(SAME AS ABOVE)</b>	
3c. Tel. No. <b>210-677-9155</b>	3d. Cell No.	3e. Fax No.	3d. E-Mail Address <b>RAUL.BENAVIDES15.CTR@MAIL.MIL</b>
4a. Type of Establishment (Factory, mine, wholesaler, etc.) <b>BUS GARAGE</b>		4b. Principal product or service <b>SCA</b>	
5b. Description of Unit Involved Included: <b>ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: BUS DRIVERS AND DISPATCHERS.</b> Excluded: <b>OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.</b>		5a. City and State where unit is located: <b>FORT SAM HOUSTON SAN ANTONIO, TX</b>	
6a. No. of Employees in Unit: <b>20</b>		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u>Petition will serve as request for recognition</u> and Employer declined recognition on or about _____ (date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). <b>NONE</b>		8b. Address <b>N/A</b>	
8c. Tel. No. <b>N/A</b>	8d. Cell No. <b>N/A</b>	8e. Fax No. <b>N/A</b>	8f. E-Mail Address <b>N/A</b>
8g. Affiliation, if any <b>N/A</b>		8h. Date of Recognition or Certification <b>N/A</b>	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) <b>N/A</b>
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>N/A</u> If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) <b>NONE</b>			
10a. Name <b>N/A</b>	10b. Address <b>N/A</b>	10c. Tel. No. <b>N/A</b>	10d. Cell No. <b>N/A</b>
		10e. Fax No. <b>N/A</b>	10f. E-Mail Address <b>N/A</b>
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): <b>DECEMBER 18, 2018</b>	11c. Election Time(s): <b>7:30 AM - 10:00 AM &amp; 1:30 PM - 5:00 PM</b>		11d. Election Location(s): <b>BREAK ROOM IN PLANT</b>
12a. Full Name of Petitioner (including local name and number) <b>IAMAW, AFL-CIO</b>		12b. Address (street and number, city, state, and ZIP code) <b>690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011</b>	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) <b>INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO</b>			
12d. Tel. No. <b>817-505-0100</b>	12e. Cell No.	12f. Fax No. <b>817-459-0107</b>	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title <b>JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE</b>		13b. Address (street and number, city, state, and ZIP code) <b>690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011</b>	
13c. Tel. No. <b>817-505-0100</b>	13d. Cell No. <b>682-401-7835</b>	13e. Fax No. <b>817-459-0107</b>	13d. E-Mail Address <b>JLITTLE@IAMAW.ORG</b>
I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) <b>JAMES R. LITTLE</b>	Signature 	Title <b>GRAND LODGE REPRESENTATIVE</b>	DATE <b>11/27/2018</b>

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

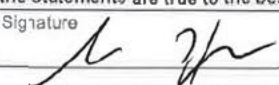
16-RC-231712

Date Filed

11/28/2018

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://www.nlr.gov/), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer:</b> Jose Ernesto Salazar, LLC. d/b/a JESCO		<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 102 Fletcher Dr, Suite A, Del Rio, TX 78840	
<b>3a. Employer Representative - Name and Title:</b> Jose Salazar, Owner		<b>3b. Address (if same as 2b - state same):</b> SAME	
<b>3c. Tel. No.</b> 830-422-2218	<b>3d. Cell No.</b> 830-765-0657	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> salazar.jesco@yahoo.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.):</b> Government Facility		<b>4b. Principal Product or Service</b> Custodial and Maintenance Service	
<b>5a. City and State where unit is located:</b> Brownsville, TX		<b>5b. Description of Unit Involved:</b> <b>Included:</b> See attachment <b>Excluded:</b> See attachment	
<b>6a. Number of Employees in Unit:</b> 9		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Check One:</b> <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ on or about (Date) _____ (If no reply received, so state). and Employer declined recognition <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state)</b> NONE		<b>8b. Address:</b>	
<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any:</b>		<b>8h. Date of Recognition or Certification</b>	
<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>			
<b>9. Is there now a strike or picketing at the Employer's establishment(s) involved?</b> No <input checked="" type="checkbox"/> If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
<b>10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5b above. (If none, so state)</b> NONE			
<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>
<b>11. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election: <b>11a. Election Type:</b> <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
<b>11b. Election Date(s):</b> Mail	<b>11c. Election Time(s):</b> Mail	<b>11d. Election Location(s):</b> Mail	
<b>12a. Full Name of Petitioner (including local name and number):</b> Consolidated Commercial Workers of America, Local 528		<b>12b. Address (street and number, city, State and ZIP code):</b> 148-06 Hillside Ave, Jamaica, NY 11435	
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):</b> NOITU-IUJAT			
<b>12d. Tel. No.</b> 718-291-3434	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> 718-526-2920	<b>12g. E-Mail Address</b>
<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title:</b> Gerald Hustick, Representative		<b>13b. Address (street and number, city, State and ZIP code):</b> 148-06 Hillside Ave, Jamaica, NY 11435	
<b>13c. Tel. No.</b> 718-291-3434	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> 718-526-2920	<b>13f. E-Mail Address</b> ghustick@noitu.org
<b>I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.</b>			
<b>Name (Print)</b> Gerald Hustick	<b>Signature</b> 	<b>Title</b> Representative	<b>Date</b> 11/28/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)  
PRIVACY ACT STATEMENT

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**Jose Ernesto Salazar, LLC d/b/a JESCO**

5b.

**Included:** All full-time and regular part-time employees working on the employer's contract with the Government at U.S. border crossing facilities in Brownsville, TX.

**Excluded:** All office, clerical, guards, professional, confidential employees, and supervisors, as defined in the National Labor Relations Act.